Rec'd PCT/PTO 15 MAR 2005

COMBINED DECLARATION F (Includes Reference to PCT Internation	OR PATENT APPLICATION AN ational Applications)	D POWER OF ATTORNEY	ATTORNEY'S DOCKET NUMBER				
As a below named inventor, I hereby declare that:							
My residence, post office addre	ess and citizenship are as stated below t	next to my name.	-				
I believe I am the original, first a names are listed below) of the s	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
Effect pigments that are surface	Effect pigments that are surface-modified with LCST and/or UCST polymers						
the specification of which (chec	the specification of which (check only one item below):						
is attached hereto.	<u> </u>						
was filed as United	States application						
Serial No							
on		•					
and was amended							
on (if applica	.ble).						
	ernational application						
Number PCT/EP20							
on 04.09.2 <u>003</u> ,							
·	nder PCT Article 19						
on (if applica							
	wed and understand the contents of the	e above-identified specification, inclu	ding the claims, as				
amended by any amendment re		- 400 (
continuation-in-part application	I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim priority benefits under Title 35, United States Code, § 119 or 365 (b) of the following United States provisional application(s) and of any foreign application(s) for patent or inventor's certificate or 365(a) of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:							
	EIGN/PCT APPLICATION(S) AND ANY I	PRIORITY CLAIMS UNDER 35 U.S.C. 1 DATE OF FILING	19: PRIORITY CLAIMED				
COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	(day, month, year)	UNDER 35 USC 119				
Germany	102 43 438.7	18.09.2002	YES NO				
			YES NO				
			YES NO				
			YES NO				
POWER OF ATTORNEY: As a named inventor, I hereby appoint I. William Millen (19,544); John L. White (17,746); Anthony J. Zelano (27,969); Alan E.J. Branigan (20,565); John R. Moses (24,983); Harry B. Shubin (32,004); Brion P. Heaney (32,542); Richard J. Traverso (30,595); John A. Sopp (33,103); Richard M. Lebovitz (37,067); James E. Ruland (37,432); Nancy Axelrod (44,014); Jennifer J. Branigan (40,921); Robert E. McCarthy, (46,044); Jonathan G. Brown (47,451); and Csaba Henter (50,908) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.							
Send Correspondence to:Customer N	703/243-6333 Telephone No.	Direct Telep	hone Calls to:				
23599 PATENT TRADEMARK OFFICE							

Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2	OF INVENTOR HUBER		Adalbert	
0	RESIDENCE &	CITY Bensheim	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP DE
1	CITIZENSHIP		DE	52/
	POST OFFICE	STREET Bonnhoeferstrasse 9	CITY	STATE & ZIP CODE/COUNTRY
	ADDRESS	Bollinoeterstrasse 9	Bensheim	64625 Bensheim, Germany
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
$ v_2 $	OF INVENTOR	ENTENMANN	Marc	
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
2	CITIZENSHIP		DE	DE DEX
	POST OFFICE	STREET	CITY	70734 Fellbach, Germany
	ADDRESS	Am Sandgraben 13	Fellbach	
_	FULL NAME	FAMILY NAME	FIRST GIVEN NAME Thadeus	SECOND GIVEN NAME
2	OF INVENTOR	SCHAUER	111111111111111111111111111111111111111	
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
3	CITIZENSHIP	Althengstett	DE	DE DEX
	POST OFFICE	STREET	CITY Althengstett	STATE & ZIP CODE/COUNTRY 75382 Althengstett, Germany
	ADDRESS	Waldenser Strasse 56	Annengatett	75562 Atmengsten, Germany
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0 4	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
5	CITIZENSHIP			
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
,	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2 0 7	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY

Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

2 0 8	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СІТҮ	STATE & ZIP CODE/COUNTRY
2 0 9	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2 1 0	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1 1	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
:	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2 1 2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY .	STATE & ZIP CODE/COUNTRY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	26 01.05	SIGNATURE OF INVENTOR 207	DATE
SIGNATURE OF INVENTOR 202	26.01.05	SIGNATURE OF INVENTOR 208	DATE
SIGNATURE OF INVENTOR 203	DATE 26.04.05	SIGNATURE OF INVENTOR 209	DATE
SIGNATURE OF INVENTOR 204	DATE	SIGNATURE OF INVENTOR 210	DATE 1
SIGNATURE OF INVENTOR 205	DATE	SIGNATURE OF INVENTOR 211	DATE
SIGNATURE OF INVENTOR 206	DATE	SIGNATURE OF INVENTOR 212	DATE